

103<sup>D</sup> CONGRESS  
1<sup>ST</sup> SESSION

# H. R. 1829

To amend the Public Health Service Act to provide for demonstration projects for the identification by health care providers of victims of domestic violence and sexual assault, to provide for the education of the public on the consequences to the public health of such violence and assault, and to provide for epidemiological research on such violence and assault.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 22, 1993

Mr. McDERMOTT (for himself, Mrs. MORELLA, and Mr. KREIDLER) introduced the following bill; which was referred to the Committee on Energy and Commerce

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## A BILL

To amend the Public Health Service Act to provide for demonstration projects for the identification by health care providers of victims of domestic violence and sexual assault, to provide for the education of the public on the consequences to the public health of such violence and assault, and to provide for epidemiological research on such violence and assault.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Women’s Violence-  
5 Related Injury Reduction Act”.

1 **SEC. 2. FINDINGS.**

2 The Congress finds the following:

3 (1) Domestic violence and sexual assault rep-  
4 resent serious threats to the health and well-being of  
5 millions of women in the United States.

6 (2) Violence against women has serious health  
7 consequences for its victims, including fatality, se-  
8 vere trauma, repeated physical injuries, and chronic  
9 stress-related disorder.

10 (3) Violence against women has serious mental  
11 health consequences for its victims, including sub-  
12 stance abuse, severe psychological trauma, and sui-  
13 cide.

14 (4) Approximately 4,000,000 women in the  
15 United States are victims of domestic violence each  
16 year.

17 (5) One of two women is a victim of domestic  
18 violence or sexual assault during her lifetime.

19 (6) Battering is the leading cause of injury to  
20 women.

21 (7) It has been estimated that 1 in 6 pregnant  
22 women are battered, resulting in increased rates of  
23 miscarriage, stillbirths, and low-birthweight babies.

24 (8) Domestic violence may account for as much  
25 as one-third of emergency-room visits by women, an  
26 annual total of approximately 28,700 such visits.

1           (9) Estimates based on the National Crime  
2       Survey provide that domestic violence accounts for  
3       21,000 hospitalizations, 99,800 days of hospitaliza-  
4       tion, and 39,900 visits to a physician each year.

5           (10) Fewer than 5 percent of injured women  
6       are correctly diagnosed by medical personnel as  
7       being victims of domestic violence.

8           (11) Hospitals and clinics do not have a uni-  
9       form set of protocols for the identification and refer-  
10      ral of victims of domestic violence and sexual as-  
11      sault, or for the training of health care professionals  
12      to perform such functions.

13          (12) A national surveillance system for monitor-  
14      ing the health effects of domestic violence and sexual  
15      assault should be established to determine the na-  
16      ture and extent of such violence and assault in the  
17      United States.

18 **SEC. 3. ESTABLISHMENT OF CERTAIN HEALTH PROGRAMS**  
19                               **REGARDING DOMESTIC VIOLENCE AND SEX-**  
20                               **UAL ASSAULT.**

21       Part B of title III of the Public Health Service Act  
22      (42 U.S.C. 243 et seq.), as amended by section 308 of  
23      Public Law 102-531 (106 Stat. 3495), is amended by in-  
24      serting after section 317D the following section:

1 “HEALTH PROGRAMS REGARDING DOMESTIC VIOLENCE  
2 AND SEXUAL ASSAULT

3 “SEC. 317E. (a) DEMONSTRATION PROJECTS FOR  
4 IDENTIFICATION AND REFERRALS OF VICTIMS.—

5 “(1) IN GENERAL.—The Secretary, acting  
6 through the Director of the Centers for Disease  
7 Control and Prevention, may make grants to public  
8 and nonprofit private entities for the purpose of car-  
9 rying out demonstration projects in which health  
10 care providers, in providing such care—

11 “(A) identify individuals whose medical  
12 condition or statements indicate that the indi-  
13 viduals are victims of domestic violence or sex-  
14 ual assault; and

15 “(B) refer the individuals to entities that  
16 provide services regarding such violence and as-  
17 sault, including referrals for counseling, housing  
18 (including temporary housing), legal services,  
19 and services of community organizations.

20 “(2) TRAINING.—The Secretary may authorize  
21 grantees under paragraph (1) to expend the grants  
22 to train health care providers to carry out the activi-  
23 ties described in such paragraph.

24 “(3) PROTOCOLS FOR IDENTIFICATION, REFER-  
25 RALS, AND TRAINING.—The Secretary may make a

1 grant under paragraph (1) only if the applicant for  
2 the grant agrees that the demonstration project in-  
3 volved will not begin operation until the Secretary  
4 approves for the project protocols for identifying and  
5 referring victims, and training health care providers,  
6 for purposes of such paragraph. The Secretary may  
7 authorize grantees under such paragraph to expend  
8 the grants to develop such protocols.

9 “(4) CONSULTATION WITH RELEVANT ENTI-  
10 TIES.—The Secretary may make a grant under  
11 paragraph (1) only if the applicant involved has, in  
12 developing the proposal of the applicant for a dem-  
13 onstration project under such paragraph, consulted  
14 with public and nonprofit private entities that, in the  
15 geographic area in which the project is to be carried  
16 out, provide services regarding domestic violence or  
17 sexual assault.

18 “(5) REPORTS.—The Secretary may make a  
19 grant under paragraph (1) only if the applicant for  
20 the grant agrees to submit to the Secretary a report  
21 describing the activities of the project under such  
22 paragraph for the fiscal year for which the grant is  
23 made.

24 “(b) PUBLIC EDUCATION.—The Secretary, acting  
25 through the Director of the Centers for Disease Control

1 and Prevention, shall carry out a program to educate  
2 health care providers and the public on the consequences  
3 to the public health of domestic violence and sexual as-  
4 sault.

5 “(c) EPIDEMIOLOGICAL RESEARCH.—

6 “(1) IN GENERAL.—The Secretary, acting  
7 through the Director of the Centers for Disease  
8 Control and Prevention, shall provide for the con-  
9 duct of epidemiological research on domestic violence  
10 and sexual assault. In providing for such research,  
11 the Secretary shall ensure that, with respect to such  
12 violence and assault, data is collected on—

13 “(A) the incidence of cases and the effect  
14 of the cases on the costs of health care in the  
15 United States;

16 “(B) the type and severity of injuries sus-  
17 tained and the type and severity of any other  
18 resulting health conditions;

19 “(C) the extent to which victims seek  
20 treatment, including a comparison of the inci-  
21 dence of cases with the incidence of seeking  
22 treatment;

23 “(D) a description of common cir-  
24 cumstances influencing victims not to seek  
25 treatment;

1           “(E) the types of medical facilities and  
2           health care providers from which victims seek  
3           treatment; and

4           “(F) the demographic characteristics of  
5           the individuals from whom data described in  
6           subparagraphs (A) through (E) is collected.

7           “(2) NATIONAL SYSTEM.—In carrying out para-  
8           graph (1), the Secretary shall cooperate with the  
9           States for the purpose of establishing, to the extent  
10          practicable, a national system for the collection of  
11          data regarding domestic violence and sexual assault.

12          “(3) CONFIDENTIALITY.—Standards of con-  
13          fidentiality under section 308(d) shall apply to data  
14          collected under paragraph (1) to the same extent  
15          and in the same manner as such section applies to  
16          information obtained under section 304, 306, or  
17          307.

18          “(4) REPORT.—Not later than February 1,  
19          1996, and every 2 years thereafter, the Secretary  
20          shall submit to the Congress a report summarizing  
21          the data collected under paragraph (1) for the  
22          preceding 2 years.

23          “(c) AUTHORIZATION OF APPROPRIATIONS.—

24                 “(1) IN GENERAL.—For the purpose of carry-  
25          ing out this section, there are authorized to be ap-

1       appropriated \$20,000,000 for fiscal year 1994, and  
2       such sums as may be necessary for each of the fiscal  
3       years 1995 through 1997.

4               “(2)   ALLOCATION    FOR   DEMONSTRATION  
5       PROJECTS.—Of the amounts appropriated under  
6       paragraph (1) for a fiscal year, the Secretary shall  
7       make available not less than 60 percent for grants  
8       under subsection (a).”.

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